

| POSITION                         | INITIALS | ID NO. | DATE    |
|----------------------------------|----------|--------|---------|
| <b>FEE DETERMINATION</b>         |          |        |         |
| <b>G.R.P.E. CLASSIFIER</b>       |          | 8      | 12-1500 |
| <b>FORMALITY REVIEW</b>          | TM       | TC864  | 3/21/01 |
| <b>RESPONSE FORMALITY REVIEW</b> |          |        |         |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 1     | 1     | 1        | 1/16/01 |
| 2     | 1     | 1        |         |
| 3     | ✓     | 1        |         |
| 4     | ✓     | 1        |         |
| 5     | 0     | 1        |         |
| 6     | ✓     | 1        |         |
| 7     | 1     | 1        |         |
| 8     | 1     | 1        |         |
| 9     | 1     | ✓        |         |
| 10    | =     | ✓        |         |
| 11    | 1     | ✓        |         |
| 12    | ✓     | ✓        |         |
| 13    | ✓     | ✓        |         |
| 14    | 0     | 0        |         |
| 15    | ✓     | 1        |         |
| 16    | ✓     | 1        |         |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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